DATESIT ADDI	ICATION SEE DETERMINATION DECORD	l l

**Application or Docket Number** 

Effective October 1, 2000							1:9/960260										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY						
TOTAL CLAIMS							RAT	E	FEE	[	RATE	FEE					
FOR			NUMBER FILED NUMBER E			R EXTRA	BASIC	FEE	355.00	OR	BASIC FEE	710.00					
TOTAL CHARGEABLE CLAIMS			94 minus 20= * 4				X\$ 9	)=		OR	X\$18=	7.7.					
INDEPENDENT CLAIMS			5 minus 3 = 2				X40	=		OR	X80=	160					
MULTIPLE DEPENDENT CLAIM PRI			· · · · · · · · · · · · · · · · · · ·				+135	<u>-</u>			+270=	100					
* If the difference in column 1 is less than zero, enter "0" in column 2					olumn 2	TOTA			OR OR	TOTAL	-110						
٠	CLAIMS AS AMENDED - PART II								<b></b>	IUM	OTHER	マチュー THAN					
(Column 1) (Column 2) (Column						(Column 3)	SMA	LL E	ENTITY	OR	SMALL 1						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES' NUMBER PREVIOUS PAID FO	R SLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE					
MON	Total	•	Minus	**		=	X\$ 9	)= ]		OR	X\$18=						
AME	Independent	•	Minus	***		=	X40	=		OR	X80=						
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT C	LAIM		+135	5=		OR	+270=						
						1	TO ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE						
	W. SWILL	(Column 1)		(Column	2)	(Column 3)					. · . · · · · · · · · · · · · · · · · ·						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE					
NON	Total	•	Minus	**		=	X\$ 9	<b>)</b> =		OR	X\$18=	<b>.</b> *					
AME	Independent	*	Minus	***	1.470	=	X40	=		OR	X80=						
٦	FIRST PRESE	ENTATION OF M	ULTIPLE DEI	PENDENT C	LAIM		+13			OR	+270=						
							ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE						
_		(Column 1)		(Column		(Column 3)	1					·					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUMBE PREVIOUS PAID FO	R	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE					
Q Q	Total	•	Minus	**		=	X\$ 9	)=		OR	X\$18=	ï					
ME	Independent	•	Minus	***		=	X40	=		OR	X80=	<u> </u>					
الا	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT C	CLAIM		l		<b></b>	1		<u> </u>					
	If the entry in colu	umn 1 is less than t	the entry in colu	ımn 2, write "0	)" in col	lumn 3.	+135	TAL		OR	+270= TOTAL						
**	If the "Highest Nu	umber Previously P umber Previously P	Paid For" IN THE Paid For" IN TH	IS SPACE is le IS SPACE is le	ess tha ess tha	in 20, enter "20." an 3, enter "3."	ADDIT.	FEE			ADDIT. FEE	<u> </u>					
l	The "Highest Nur	mber Previously Pa	aid For" (Total o	r Independent	t) is the	highest numbe	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										